

Campground Host/Park Host Application

Date:			
	(First, Middle, Last)		
Preferred Name:			
Address:			
Home Phone:			
Employment: Employer:	Position:		Date of Service:
1			
2			
3			
Education: Please circle highest leve	el completed:		
HS/GED	Vocational	College	Graduate Study
Skills/Interests: Do you have any particu	ılar skills you would like to	use as a Volunteer?	
How many years have	you been camping?		
Have you volunteered a	as a campground host before	re? Yes _	No
If so, please list the loca	ation(s), dates and duties:		

Describe any other volunteer experience:	
Health: Please list any medical conditions which might affect your ability to perform the duties of a campground host:	
References: List three persons not related to you who know your qualifications: Name: Phone: Relationship: 1	
2.	
Why do you want to be a campground host in Virginia?	
How did you learn about our campground host program?	

Availability:

Where would you prefer to be a host? Please indicate your top three choices and indicate whether you are applying for a Campground Host or Park Host position.

CHOICE 1-3	SITES	CAMPGROUND HOST	PARK HOST	AVAILABLE DATES
				Start End
	Bear Creek Lake State Park		///////////////////////////////////////	thru
	Caledon Natural Area	///////////////////////////////////////		thru
	Chippokes Plantation State Park			thru
	Claytor Lake State Park			thru
	Douthat State Park		///////////////////////////////////////	thru
	Fairy Stone State Park			thru
	First Landing State Park		///////////////////////////////////////	thru
	Grayson Highlands State Park			thru
	Holliday Lake State Park		///////////////////////////////////////	thru
	Hungry Mother State Park		///////////////////////////////////////	thru
	Kiptopeke State Park		///////////////////////////////////////	thru
	Natural Tunnel State Park		///////////////////////////////////////	thru
	Occoneechee State Park			thru
	Pocahontas State Park			thru
	Smith Mountain Lake State Park		///////////////////////////////////////	thru
	Southwest VA Museum	///////////////////////////////////////		thru
	Staunton River State Park		///////////////////////////////////////	thru
	Twin Lakes State Park			thru
	Westmoreland State Park			thru

Type of camping equipment: Camper	Trailer	Motor Home
Size or length of equipment (including sl	ide out):	
Will you have an additional vehicle? (It is recommended that hosts bridge)		
Pet: Will you have a pet with you?	Yes	No
What kind?(Current rabies vaccination certified	cation required, please bri	ng a copy with you.)
Person to contact in case of emergency:		
Name:		
Phone:		
Applicant's Signature:		
	OFFICE USE ONLY	
Contact Date:Action taken:		
Reference Check:	Background Check:	J.D